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CONFIRMATION NO. 6084

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APPLICANTS

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** CONTINUING DATA ***** *PR*

This appln claims benefit of 60/533,910 12/31/2003
and is a CIP of 10/394,513 03/21/2003
and is a CIP of 09/498,178 02/04/2000 PAT 6,705,555

** FOREIGN APPLICATIONS ***** *NONE*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** SMALL ENTITY **

** 04/30/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY MI	SHEETS DRAWING 5	TOTAL CLAIMS 15	INDEPENDENT CLAIMS 4
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no Met after Allowance	Verified and Acknowledged Examiner's Signature <i>[Signature]</i> Initials <i>OK</i>			

ADDRESS

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TITLE

Lift station and method

FILING FEE RECEIVED 493	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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